CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

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The C/OH Instruction G	uide explains how to complete this form.	1 Filer ID (Ethics Commission Filers)	2 Total pages filed:	
3 CANDIDATE / OFFICEHOLDER NAME	MS/MRS/MR FIRST	MI	OFFICE USE ONLY	
TVAIVIE	NICKNAME LAST	SUFFIX	Date Received	
	Owens		Date Received  Page 1222324 25 36 37 36 37 36 37 36 37 36 37 37 37 37 37 37 37 37 37 37 37 37 37	
4 CANDIDATE / OFFICEHOLDER MAILING		CITY; STATE; ZIP CODE	RECEIVED 2	
ADDRESS	4408 Nothing ham	organ, Kir 100 g	JAN 2010	
Change of Address	)		CITY SECRETARITY OF BRYAN	
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER (979) 575	EXTENSION (	Date Natificelivered or Date Position ed	
6 CAMPAIGN	MS / MRS / MR	MI	Receipt # Amount \$	
TREASURER NAME	Hatt	Date Processed		
	NICKNAME LAST	SUFFIX	Date Imaged	
7 CAMPAIGN	STREET ADDRESS (NO PO BOX PLEASE); APT / S	SUITE #; CITY; STATE;	ZIP CODE	
TREASURER ADDRESS	3 -0 -1111	Paul Ruigia	Tr Mac	
(Residence or Business)	3807 Williams	s Dence Dyan	i a mov	
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER  (979) - COS	ng extension		
9 REPORT TYPE	January 15 30th day before 6	election Runoff	15th day after campaign	
	Control of the contro		treasurer appointment (Officeholder Only)	
	July 15 8th day before ele	ection Exceeded \$500 limit	Final Report (Attach C/OH - FR)	
10 PERIOD COVERED	Month Day Year	Month	Day Year	
OOVENED	7/1/17	THROUGH $\partial$	(3) / 17	
11 ELECTION				
	Month Day Year Primary	Runoff Other Description Special		
	derieral			
12 OFFICE	OFFICE HELD (if any)	13 OFFICE SOUGHT (if known	•	
	councilmember SMD#3	Courincim	uembe SMD#3	
GO TO PAGE 2				
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## **CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT**

## FORM C/OH **COVER SHEET PG 2**

14 C/OH NAME		15	Filer ID (Ethics Commission Filers)		
16 NOTICE FROM POLITICAL COMMITTEE(S)	THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.				
	COMMITTEE TYPE	COMMITTEE NAME			
	GENERAL				
	SPECIFIC	COMMITTEE ADDRESS			
		COMMITTEE CAMPAIGN TREASURER NAME			
Additional Pages					
		COMMITTEE CAMPAIGN TREASURER ADDRESS			
17 CONTRIBUTION TOTALS		POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN ES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZE			
		POLITICAL CONTRIBUTIONS THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$		
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED		\$		
	4. TOTAL	POLITICAL EXPENDITURES	\$		
CONTRIBUTION BALANCE		POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DOORTING PERIOD	DAY \$ \( \times \)		
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD \$				
I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 16, Election Code.					
	Notary Public. State of My Commission Ex July 22, 2019	pires	idate or Officeholder		
AFFIX NOTARY STAMP / SEALABOVE					
Sworn to and subscribed before me, by the said <u>GVEQ S. DWNS</u> , this the <u>January</u> , 2018, to certify which, witness my hand and seal of office.					
Christia a. Cabica Christina A. Cabrera Notary Public					
Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath					